GOVERNMENT OF INDIA
HEALTH AND FAMILY WELFARE
LOK SABHA

UNSTARRED QUESTION NO:608
ANSWERED ON:18.11.2016
Health Care in India
Chaudhury Shri Jitendra

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether the Government is aware that the maternal mortality rate in the country is 178 out of 1,00,000, if so, the reasons therefor;

(b) whether the Government is aware that 47 per cent of under-five children in India are malnourished, if so, the reasons therefor;

(c) whether the Government is aware that World Health Organisation (WHO) recommends 3.5 hospital beds per 1,000 peoples, while India has 0.7 beds per 1,000 people, if so, the reasons therefor;

(d) whether the Government is aware that only one doctor is available for every 1,700 peoples, if so, the reasons therefor;

(e) whether the Government is aware that nearly one million Indians die every year due to inadequate healthcare facilities and close to 700 million people have no access to specialist care if so, the reasons thereof; and

(f) the steps taken by the Government in this regard?

Answer

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND
FAMILY WELFARE
(SHRI FAGGAN SINGH KULASTE)
(a): As per the official estimates of Registrar General of India Sample Registration System (RGI -SRS), Maternal Mortality Ratio (MMR) has shown a decline from 178 per 100,000 live births in the period 2010-12 to 167 per 100,000 live births in the period 2011-13.

The reasons for maternal deaths are mainly attributed to post partum haemorrhage, eclampsia, anaemia, obstructed labour, co-morbid conditions.

(b): As per the Rapid Survey of Children (2013-14), the prevalence of malnourished children in India is 29 per cent. The various reasons for under nutrition in children may be due to inadequate dietary intake and disease, inadequate access to food, inadequate care for mothers and children, insufficient healthcare services and unhealthy environment, poverty, female illiteracy, poor access to clean drinking water, hygiene and sanitation, high fertility etc.

(c): As per the data available under National Health Profile 2016, the hospital bed to people ratio is about 0.6 beds per 1000 population. This figure however, does not include the private facilities data.

Support is being provided under the NHM for construction and up gradation of infrastructure in Government health facilities up to district hospitals, development of Maternal and Child Health wings etc. which contribute to increasing the availability of hospitals beds.

(d): As per information provided by Medical Council of India, there are a total of 9,59,198 doctors registered with the State Medical Council/Medical Council of India as on 30th June, 2015. Assuming 80% availability, it is estimated that around 7.67 lakh doctors may be actually available for active service. It gives a doctor-population ratio of 1:1681.
Beside there are 7.44 lakh Ayurveda, Unani and Homeopathy(AUH) doctors. Together they make the ratio 1:893.

The Government has taken various steps to increase the number of doctors. These efforts include (i) Establishment of New Medical Colleges by upgrading district/referral hospitals preferably in underserved districts of the country; (ii) Strengthening of existing Government medical College to increase UG seats (iii) relaxation in the norms of setting up of Medical College; (iv) Enhancement of maximum intake capacity at MBBS level from 150 to 250.
(e): Public health being a state subject, no such data is maintained centrally.

(f): Public health being a State subject the primary responsibility to ensure availability of health human resources in public health facilities lies with the State Governments. However, under the National Health Mission (NHM), financial and technical support is provided to States/UTs to strengthen their healthcare systems including support for engagement of health human resources on contractual basis and construction and upgradation of public health facilities, based on the requirements posed by the States/UTs in their Programme Implementation Plans (PIPs).